PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

10/604,682

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE OR | | | OTHER THAN SMALL ENTITY | |
|--|--|--|-----------------|-----------------------------------|----------------------------|------------------|-------|----------------------|------------------------|----------------|-------------------------|------------------------|
| TOTAL CLAIMS | | | • | | | | | RATE | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 150.00 | OR | Basic Fee | 300.00 |
| TC | TAL CHARGE | ABLE CLAIMS | 20 minus 20= | | . 0 | | | X\$ 25= | | OR | X\$50= | |
| INE | DEPENDENT C | LAIMS | # minus 3 = " (| | | | | X100= | | OR | X200= | |
| ML | JLTIPLE DEPE | NDENT CLAIM P | RESENT | | | | | +180= | | OR | +360= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | | OR | TOTAL | | |
| 2/2// CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALL | ENTITY | OR | OTHER SMALL | | |
| MENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | EST BER BUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| ₹0 | Total | - 14 | Minus | - 20 | 0 | = 0 | | X\$ 25= | | OR | X\$50= | |
| AMENDM | Independent | • 4 | Minus | 1 | <u> </u> | - / | | X100= | | OR | X200= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +180= | | OR | +360= | |
| | | | | | | | | TOTAL DOIT, FEE | • | OR | TOTAL ADDIT. FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | • |
| AMENDMENT B | • | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUME PREVIO PAID F | BER JUSLY - | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | •• | | = | | X\$ 25≃ | | OR | X\$50= | ~ |
| | Independent | | Minus | *** | 04 4144 | • | | X100= | | OR | X200= | |
| | FIRST PRESE | NTATION OF MU | JUTIPLE DEF | LTIPLE DEPENDENT | | CLAIM | | +180= | | OR | +360= | |
| | | | | | | | | TOTAL | · | OR. | TOTAL ADDIT, FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | 2 | • | • |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | • | HIGHE NUMB PREVIO PAID F | ER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | 370 | | * | | X\$ 25= | | OR. | X\$50= | |
| | Independent | • | Minus | *** | | E . | | X100= | | OR | X200= | |
| Ц | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +160= | | OR | +360= | |
| • [| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." | | | | | | | | | OR , | TOTAL LODIT, FEE | |
| - | the Highest Nu | riber Previously Paid ber Previously Paid | id For IN THI | S SPACE IS | less the | 13, enter 3." | | ODIT. FEEL | ropriate box | • | | |